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8
9 **BEFORE THE**
10 **MEDICAL BOARD OF CALIFORNIA**
11 **DEPARTMENT OF CONSUMER AFFAIRS**
12 **STATE OF CALIFORNIA**

13 In the Matter of the Accusation Against:

Case No. 800-2021-079487

14 **Natalia Alexis Abrikosova, M.D.**
15 **2577 Samaritan Dr., Suite 820**
16 **San Jose, CA 95124-4109**

A C C U S A T I O N

17 **Physician's and Surgeon's Certificate**
18 **No. A 82312,**

Respondent.

19
20 **PARTIES**

21 1. Reji Varghese (Complainant) brings this Accusation solely in his official capacity as
22 the Deputy Director of the Medical Board of California, Department of Consumer Affairs
23 (Board).

24 2. On March 19, 2003, the Medical Board issued Physician's and Surgeon's Certificate
25 No. A 82312 to Natalia Alexis Abrikosova, M.D. (Respondent). The Physician's and Surgeon's
26 Certificate was in full force and effect at all times relevant to the charges brought herein and will
27 expire on August 31, 2024, unless renewed.
28

JURISDICTION

3. This Accusation is brought before the Board, under the authority of the following laws. All section references are to the Business and Professions Code (Code) unless otherwise indicated.

4. Section 2227 (a) of the Code provides in pertinent part that a licensee whose matter has been heard by an administrative law judge . . . who is found guilty . . . may, in accordance with the provisions of this chapter:

(1) Have his or her license revoked upon order of the board.

(2) Have his or her right to practice suspended for a period not to exceed one year upon order of the board.

(3) Be placed on probation and be required to pay the costs of probation monitoring upon order of the board.

(4) Be publicly reprimanded, which may include a requirement that the licensee complete relevant educational courses,

(5) Have any other action taken in relation to discipline as part of an order of probation.

5. Section 2234 of the Code, states in pertinent part:

“The board shall take action against any licensee who is charged with unprofessional conduct. In addition to other provisions of this article, unprofessional conduct includes, but is not limited to, the following:

(a) Violating or attempting to violate, directly or indirectly, assisting in or abetting the violation of, or conspiring to violate any provision of this chapter.

(b) Gross negligence.

(c) Repeated negligent acts.

(d) Incompetence.”

6. Section 2242 of the Code states:

“(a) Prescribing, dispensing, or furnishing dangerous drugs as defined in Section 4022 without an appropriate prior examination and a medical indication, constitutes unprofessional conduct. An appropriate prior examination does not require a synchronous interaction between the patient and the licensee and can be achieved through the use of telehealth, including, but not limited to, a self-screening tool or a questionnaire, provided that the licensee complies with the appropriate standard of care.

1 (b) No licensee shall be found to have committed unprofessional conduct within
2 the meaning of this section if, at the time the drugs were prescribed, dispensed, or
3 furnished, any of the following applies:

4 (1) The licensee was a designated physician and surgeon or podiatrist serving in
5 the absence of the patient's physician and surgeon or podiatrist, as the case may be,
6 and if the drugs were prescribed, dispensed, or furnished only as necessary to
7 maintain the patient until the return of the patient's practitioner, but in any case no
8 longer than 72 hours.

9 (2) The licensee transmitted the order for the drugs to a registered nurse or to a
10 licensed vocational nurse in an inpatient facility, and if both of the following
11 conditions exist:

12 (A) The practitioner had consulted with the registered nurse or licensed
13 vocational nurse who had reviewed the patient's records.

14 (B) The practitioner was designated as the practitioner to serve in the absence
15 of the patient's physician and surgeon or podiatrist, as the case may be.

16 (3) The licensee was a designated practitioner serving in the absence of the
17 patient's physician and surgeon or podiatrist, as the case may be, and was in
18 possession of or had utilized the patient's records and ordered the renewal of a
19 medically indicated prescription for an amount not exceeding the original prescription
20 in strength or amount or for more than one refill.

21 (4) The licensee was acting in accordance with Section 120582 of the Health
22 and Safety Code."

23 7. Section 2266 of the Code states: "The failure of a physician and surgeon to maintain
24 adequate and accurate records relating to the provision of services to their patients constitutes
25 unprofessional conduct."

26 ETHICAL PRINCIPLES

27 8. In the May 2012, the American Medical Association Journal of Ethics published the
28 American Medical Association Code of Medical Ethics' Opinion on Physicians Treating Family
Members: *Opinion 8.19 – Self-Treatment or Treatment of Immediate Family Members*. Opinion
8.19 provides:

Physicians generally should not treat themselves or members of their
immediate families. Professional objectivity may be compromised
when an immediate family member or the physician is the patient;
the physician's personal feelings may unduly influence his or her
professional medical judgment, thereby interfering with the care
being delivered. ... When treating themselves or immediate family
members, physicians may be inclined to treat problems that are
beyond their expertise or training. ...

1 It would not always be inappropriate to undertake self-treatment or
2 treatment of immediate family members. In emergency settings or
3 isolated settings where there is no other qualified physician available,
4 physicians should not hesitate to treat themselves or family members
5 until another physician becomes available. In addition, while
6 physicians should not serve as a primary or regular care provider for
immediate family members, there are situations in which routine care
is acceptable for short-term, minor problems. Except in emergencies,
it is not appropriate for physicians to write prescriptions for
controlled substances for themselves or immediate family members.

7 COST RECOVERY

8 9. Section 125.3 of the Code provides, in pertinent part, that the Board may request the
9 administrative law judge to direct a licensee found to have committed a violation or violations of
10 the licensing act to pay a sum not to exceed the reasonable costs of the investigation and
11 enforcement of the case, with failure of the licensee to comply subjecting the license to not being
12 renewed or reinstated. If a case settles, recovery of investigation and enforcement costs may be
13 included in a stipulated settlement.

14 FACTUAL SUMMARY

15 10. At all times relevant to these allegations, Respondent was working as an urgent care
16 physician at the Palo Alto Medical Foundation.

17 Patient A¹

18 11. Respondent treated Patient A from 2012 through approximately March 2021. Patient
19 A is Respondent's spouse. Respondent saw Patient A as a primary care physician, despite
20 Respondent being an urgent care doctor. Patient A did not follow-up on a referral to a Family
21 Medicine Department to establish a Primary Care Physician.

22 12. During the time that Respondent served as physician to her spouse, Patient A suffered
23 from problems at work. Patient A also experienced stress as a parent of the two children he and
24 Respondent had together. Patient A suffered from multiple medical problems including
25 hyperlipidemia, benign prostatic hypertrophy, Gastro Esophageal Reflux Disease (GERD),

26
27 ¹ The patients in this document are designated as Patients A through C to protect their
28 privacy. Respondent knows the names of the patients and witnesses and can confirm their
identities through the discovery process.

1 obesity, chronic sinusitis, seasonal allergies, basal cell cancer, insomnia, and anxiety.

2 Respondent's initial treatment of Patient A was for anxiety and insomnia. Respondent began
3 prescribing Valium² and Ambien³ to Patient A. Beginning around 2012, and until on or around
4 March 30, 2021, Respondent prescribed for Patient A a combination of Valium 10 mg and
5 Ambien 10 mg (or a generic equivalent of diazepam and zolpidem), on an average of 1 per day.

6 13. For the entire time Respondent prescribed to Patient A, Patient A's records contain no
7 documentation of appropriate history, review of systems, or exam findings related to the
8 prescriptions of Valium and Ambien. Patient A's records do not contain documentation
9 regarding the indication for or use of the controlled substances, diazepam or zolpidem, or
10 adequate discussion regarding the limitation of use of these drugs, the side effects, risks, and
11 benefits. Patient A's records also do not contain any documentation about tapering down these
12 medications over time or any attempts to taper Patient A off of diazepam or zolpidem. There is
13 no controlled substances contract documented.

14 14. Respondent documented visit notes as the treating physician for Patient A on
15 3/04/2015, 03/03/2016, 04/08/2016, 08/31/2018, and 05/16/2020.

16 ///

17 ///

18 ² Valium, a trade name for diazepam, a benzodiazepine, is a centrally acting hypnotic-
19 sedative that is a Schedule IV controlled substance pursuant to Health and Safety Code section
20 11057, subdivision (d), and a dangerous drug pursuant to Business and Professions Code section
21 4022. When properly prescribed and indicated, it is used for the management of anxiety disorders
22 or for the short-term relief of anxiety. Concomitant use of Valium with opioids "may result in
profound sedation, respiratory depression, coma, and death." The Drug Enforcement
Administration (DEA) has identified benzodiazepines, such as Valium, as a drug of abuse.
(Drugs of Abuse, DEA Resource Guide (2020 Edition), at p. 68, 71.)

23 ³ Ambien, a trade name for zolpidem tartrate, is a non-benzodiazepine hypnotic of the
24 imidazopyridine class. It is a dangerous drug as defined in Business and Professions Code
25 section 4022 and a schedule IV controlled substance as defined by section 11057 of the Health
26 and Safety Code. It is indicated for the short-term treatment of insomnia. It is a central nervous
27 system depressant and should be used cautiously in combination with other central nervous
28 system depressants. Any central nervous system depressant could potentially enhance the CNS
depressive effects of Ambien. It should be administered cautiously to patients exhibiting signs or
symptoms of depression because of the risk of suicide. Because of the risk of habituation and
dependence, individuals with a history of addiction to or abuse of drugs or alcohol should be
carefully monitored while receiving Ambien. The recommended dosage for adults is 10 mg.
immediately before bedtime.

1 a. Respondent's documentation does not provide a formal assessment of anxiety
2 on any accepted anxiety rating scale, and no commentary about the effectiveness of the
3 treatment.

4 b. Respondent's documentation does not provide a history or treatment plan
5 regarding the use of zolpidem for insomnia.

6 15. Respondent's documentation does not indicate she recommended or tried SSRIs or
7 related compounds in treating Patient A's anxiety.⁴

8 16. Respondent treated her husband, Patient A, for anxiety and insomnia by prescribing
9 diazepam and zolpidem for many years. Respondent managed her husband's care as his primary
10 care physician, though she was not a primary care physician but practiced in an Urgent Care
11 setting. At the time, long term treatment of chronic anxiety and insomnia was not within
12 Respondent's area of expertise, Urgent Care medicine. Respondent's documentation of Patient
13 A's chronic conditions of anxiety and insomnia does not demonstrate she sought any outside
14 input for his care.

15 17. Patient A's records show that Respondent wrote multiple prescriptions multiple times
16 per year for steroids and antibiotics, between 2015 and 2021, including but not limited to:

- 17 • Azithromycin⁵;
- 18 • Clarithromycin⁶;

19 ⁴ The mainstay treatment of Generalized Anxiety Disorder has evolved over time to
20 become selective serotonin reuptake inhibitors (SSRIs) and not benzodiazepines, especially for
chronic use.

21 ⁵ Azithromycin, also known by the trade name Zithromax, is a semisynthetic macrolide
22 antibiotic similar in structure to erythromycin (an antibiotic very similar to penicillin, and has
23 proven useful in treating infections in patients with known allergic reactions to that drug). It is
orally administered and has a wide spectrum of activity. Azithromycin is used to treat lower
24 respiratory tract infections, including exacerbations of chronic obstructive pulmonary disease,
skin and skin structures infections, and sexually transmitted diseases. The drug is generally well-
25 tolerated with the most common adverse reactions involving the gastrointestinal tract. It is a
dangerous drug as defined in section 4022.

26 ⁶ Clarithromycin, also known by the trade name Biaxin, is semisynthetic macrolide
27 antibiotic similar in structure to erythromycin (an antibiotic very similar to penicillin, and has
proven useful in treating infections in patients with known allergic reactions to that drug). It is
28 orally administered and have a wide spectrum of activity. Clarithromycin is used to treat
respiratory tract infections, otitis media, skin and skin structure infections, and mycobacterium

- Amoxicillin⁷;
- Prednisone⁸;
- Methylprednisolone⁹;
- Doxycycline¹⁰;

avium complex, an infection that occurs in people with AIDS. It is also used to treat infection of the stomach with the bacterium *Helicobacter pylori*, now recognized as the cause of most ulcers of the stomach and duodenum. The drug is generally well-tolerated with the most common adverse reactions involving the gastrointestinal tract. Clarithromycin is on an FDA monitoring list because of reports of certain rare but potentially serious adverse reactions. It is a dangerous drug as defined in section 4022.

⁷ Amoxicillin is a semi-synthetic oral penicillin-like antibiotic. Amoxicillin is used to treat certain infections caused by bacteria, such as pneumonia; bronchitis (infection of the airway tubes leading to the lungs); and infections of the ears, nose, throat, urinary tract, and skin. It is also used in combination with other medications to eliminate *H. pylori*, a bacteria that causes ulcers. Amoxicillin is in a class of medications called penicillin-like antibiotics. Amoxicillin may cause minor side effects and some side effects can be serious but is generally well-tolerated. It is a dangerous drug as defined in section 4022.

⁸ Prednisone is a glucocorticoid (hydrocortisone and cortisone), indicated for the treatment of certain endocrine disorders, rheumatic disorders, collagen diseases, dermatologic diseases, allergic states, ophthalmic diseases, respiratory diseases, hematologic disorders, neoplastic diseases, edematous states, gastrointestinal diseases (ulcerative colitis and regional enteritis), and acute exacerbations of multiple sclerosis, tuberculous meningitis, and trichinosis. Glucocorticoids cause profound and varied metabolic effects. In addition, they modify the body's immune responses to diverse stimuli. Psychic derangements may appear when corticosteroids are used, ranging from euphoria, insomnia, mood swings, personality changes, and severe depression to frank psychotic manifestations. Also, existing emotional instability or psychotic tendencies may be aggravated by corticosteroids. A great many adverse reactions are associated with the use of prednisone including fluid retention, congestive heart failure in susceptible patients, hypertension, muscle weakness, loss of muscle mass, tendon rupture, pancreatitis, abdominal distension, facial erythema, convulsions, vertigo, headache, development of Cushingoid state, manifestations of latent diabetes mellitus, posterior subcapsular cataracts, glaucoma, urticaria and other allergic, anaphylactic or hypersensitivity reactions. It is a dangerous drug as defined in section 4022.

⁹ Methylprednisolone, known by the trade name Medrol, a corticosteroid, is similar to a natural hormone produced by your adrenal glands. It relieves inflammation (swelling, heat, redness, and pain) and is used to treat certain forms of arthritis; skin, blood, kidney, eye, thyroid, and intestinal disorders (e.g., colitis); severe allergies; and asthma. Methylprednisolone is also used to treat certain types of cancer. The drug is generally well-tolerated and most people do not experience serious side effects. Methylphenidate is a dangerous drug as defined in section 4022 of the Code.

¹⁰ Doxycycline, also known by the trade name Vibramycin, is in a class of medications called tetracycline antibiotics. It works to treat infections by preventing the growth and spread of bacteria. It works to treat acne by killing the bacteria that infects pores and decreasing a certain natural oily substance that causes acne. It works to treat rosacea by decreasing the inflammation that causes this condition. Doxycycline is also used to treat or prevent anthrax in people who may have been exposed to anthrax in the air and to treat plague. The drug is generally well-tolerated and most people do not experience serious side effects. It is also used to prevent malaria.

- Cephalexin¹¹;
- Moxifloxacin¹²;
- ProAir HFA inhaler¹³;
- Flovent HFA inhaler¹⁴;
- Amox-Clay¹⁵; and

¹¹ Cephalexin, also known by the trade name Keflex, is an antibiotic used to treat certain infections caused by bacteria such as pneumonia and other respiratory tract infections; and infections of the bone, skin, ears, genital, and urinary tract. It belongs to the class of medicines known as cephalosporin antibiotics. Cephalexin has potential side effects after prolonged or repeated usage or large doses including blood disorders, skin rash, stomach and intestine upset, diarrhea, anaphylaxis, new infections, and colitis. Cephalosporin antibiotics are closely related to penicillin and there is a remarkable amount of cross-sensitivity to allergic reactions between the two drugs. Cephalexin is a dangerous drug as defined in section 4022 of the Code.

¹² Moxifloxacin, also known by the trade name Avelox, is an antibiotic used to treat bacterial infections in many different parts of the body. It belongs to the class of medicines known as fluoroquinolones, quinolone antibiotics. Moxifloxacin has many potential serious adverse effects including developing tendinitis, changes in sensation and nerve damage, may affect the brain or central nervous system (CNS) and cause serious side effects such as seizures, may worsen muscle weakness in people with myasthenia gravis (a disorder of the nervous system that cause muscle weakness) and cause severe difficulty breathing or death. The serious side effects of the antibiotic may effect persons who have had a kidney, heart, or lung transplant, have kidney disease, or joint or tendon disorder such as rheumatoid arthritis, and people over 60 who are have the highest risk. It also may have bad interactions with oral or injectable steroids such as dexamethasone, methylprednisolone (Medrol), or prednisone (Rayos), nonsteroidal anti-inflammatory drugs (NSAID) by increasing changes of CNS risks, disturb blood glucose or effect diabetic agents, and increase anticoagulant effects of warfarin or its derivatives. Moxifloxacin is a dangerous drug as defined in section 4022 of the Code.

¹³ ProAir HFA inhaler is the trade name of albuterol sulfate and belongs to a class of drugs known as bronchodilators. It is used to prevent and treat wheezing and shortness of breath cause by breathing problems (such as asthma, chronic, obstructive pulmonary disease). It is a quick relief drug by relaxing muscles around the airways so they open up and breathe more easily. There are some side effects including nervousness, shaking, headache, and raise blood pressure. Most people do not experience serious side effects.

¹⁴ Flovent HFA inhaler is the trade name of fluticasone HFA inhaler and is used to control and prevent symptoms cause by asthma. It works by reducing swelling (inflammation) of the airways in the lungs to make breathing easier. It does not work to relieve sudden asthma attacks. It may be also used to help control symptoms of ongoing lung disease such as chronic bronchitis, emphysema, and COPD. Fluticasone belongs to a class of drugs known as corticosteroids. There are some potential serious side effects including signs of infection, vision problems, increased urinations, easy bruising/bleeding, mood changes, and bone pain. Many people using this medication do not experience serious side effects.

¹⁵ Amox-Clav is a combination of amoxicillin and clavulanic acid and is used to treat certain infections caused by bacteria including infections of the ears, lungs, sinus, skin, and urinary tract. Amoxicillin is in a class of medications called penicillin-like antibiotics. It works by

- Fluticasone¹⁶.

18. Respondent failed to document prescriptions she wrote for Patient A in Patient A's records for antibiotics and steroids. Respondent also did not document the reasons and/or conduct of an examination of Patient A prior to issuing prescriptions for antibiotics and/or steroids.

Respondent Taking a Family Member's Prescription

19. In or about 2017, Respondent took Valium (diazepam) pills, which she had prescribed for her husband, to medicate herself after a death in the family. Respondent did not go to a primary care physician to request her own prescription.

20. In or about 2018, Respondent took her husband's Valium pills, which she had prescribed for her husband, to medicate herself for shoulder pain while traveling in Italy.

21. In or about April 2021, Respondent asked her husband if she could take Valium pills, which Respondent had prescribed, in order to medicate herself before taking an oral exam with the Physician Assessment and Clinical Education (PACE) Program at the University of California, San Diego. As part of the PACE program, Respondent submitted to a urine test. On May 11, 2021, Respondent's urine test came back positive for benzodiazepines. When confronted with the positive test, Respondent chose to resign from her position as an Urgent Care physician at the Palo Alto Foundation Medical Group.

Patient B

22. On August 28, 2019, Patient B, a 35-year-old female, saw Respondent in Urgent Care. Patient B's chief complaint was bilateral facial tightness for seven days that had worsened

stopping the growth of bacteria. Clavulanic acid is in a class of medications called beta-lactamase inhibitors. It works by preventing bacteria from destroying amoxicillin. Amoxicillin and clavulanic acid may cause some minor or serious side effects.

¹⁶ Fluticasone is a prescription and nonprescription liquid to spray in the nose. Nonprescription fluticasone nasal spray is also known as Flonase Allergy is used to relieve symptoms of rhinitis such as sneezing, running or stuff or itchy nose, itchy, watery eyes or other allergies. Prescription fluticasone, also known by the trade name Xhance, is also used to relieve symptoms of nonallergic rhinitis such as sneezing and runny or stuffy nose which are not caused by allergies. Prescription fluticasone nasal spray is used to treat nasal polyps (swelling of the lining of the nose). Fluticasone is in a class of medications called corticosteroids. It works by blocking the release of certain natural substances that cause allergy symptoms.

1 in the prior three days. Patient B described difficulty swallowing and rinsing her mouth and was
2 concerned about a stroke.

3 23. Respondent documented Patient B's history and review of systems including vitals.
4 Respondent also documented performing a neurologic exam which described intact cranial nerves
5 2-12, normal deep tendon reflexes, normal motor exam, and a sensory exam revealing decreased
6 facial sensation "of the right side of the face and left side equally. Most decreased of sensation
7 (sic) in on upper lip."

8 24. Despite documenting a complete exam of the cranial nerves 2-12, Respondent, in
9 fact, did not perform a detailed exam of cranial nerves 2-12.

- 10 • Cranial nerve 2 is the optic nerve and can be assessed by checking visual acuity,
11 pupillary response and visual fields. Visual acuity can be assessed in both history
12 and by exam. But Respondent did not document a visual field exam for Patient B.
- 13 • Cranial nerves 9 (glossopharyngeal) and 10 (vagus) are tested by testing the gag
14 reflex. Respondent documented Patient B having difficulty swallowing saliva.
15 Respondent did not document testing for gag reflex.

16 Patient C

17 25. On April 28, 2019, Respondent saw Patient C in Urgent Care. Patient C presented
18 with a one day history of an itchy rash from head to toe. Patient C also had a cough, headache,
19 and eye discomfort. Review of systems for Patient C included high fever before developing rash.
20 Patient C was concerned about measles because she could not recall if she had the measles
21 vaccination. Respondent's assessment was "Rash; Fever, unspecified fever cause; Nonintractable
22 episodic headache, unspecified headache type; Discomfort of both eyes." Respondent wanted
23 measles lab work and sent Patient C to the emergency room to expedite lab work and for further
24 testing.

25 26. Respondent's referral of Patient C to the emergency room was not appropriate. Lab
26 work could be drawn at Urgent Care the same day as Patient C's visit or the next day. Patient C
27 did not require immediate lab results. In addition, results on measles labs can take a few to
28 several days and are not available immediately, reducing the immediate need to obtain the lab

work through the emergency room.

FIRST CAUSE FOR DISCIPLINE

(Unprofessional Conduct/Repeated Acts of Negligence/Incompetence/Prescribing Dangerous Drugs without Exam/Failure to Maintain Adequate and Accurate Records)

27. The allegations of Paragraphs 10 through 18 are incorporated by reference as if set out in full.

28. Respondent Natalia Alexis Abrikosova, M.D. is guilty of unprofessional conduct in her care and treatment of Patient A, and is subject to disciplinary action under sections 2234 and/or 2234(c) and/or 2234(d) and/or 2242(a) and/or 2266 of the Code in that Respondent committed repeated negligent acts and/or demonstrated incompetence and/or prescribing dangerous drugs without prior examination or medical indication and/or failed to maintain adequate and accurate medical records without a prior examination or medical indication including, but not limited to, the following:

- A. Respondent prescribed diazepam to Patient A without: (i) adequately documenting indication for or use of diazepam; and (ii) adequately documenting or indicating any discussion with Patient A regarding the limitation of use of the controlled substance, the side effects, risks (including addiction potential), benefits and appropriate relevant history and exam.
- B. Respondent prescribed diazepam to Patient A for anxiety for an inappropriate duration of time.
- C. Respondent prescribed diazepam to Patient A as an inappropriate primary treatment for anxiety.
- D. Respondent prescribed zolpidem to Patient A without: (i) adequately documenting indication for or use of zolpidem; and (ii) adequately documenting or indicating any discussion regarding the limitation of use of the controlled substance, the side effects, risks (including addiction potential), benefits and appropriate relevant history and exam.

///

- 1 E. Respondent prescribed zolpidem to Patient A for sleep for an inappropriate duration
2 of time.
- 3 F. Respondent acted as a physician for and treated a family member for anxiety using a
4 controlled substance for an extended period of time.
- 5 G. Respondent acted as a physician to and treated a family member for insomnia using
6 a controlled substance for an extended period of time.
- 7 H. Respondent did not document any medical visit prior to prescribing antibiotics to
8 Patient A. Respondent did not document the prescriptions for antibiotics to Patient
9 A including the condition being treated.
- 10 I. Respondent did not document any medical visit prior to prescribing steroids to
11 Patient A. Respondent did not document the prescriptions for steroids to Patient A
12 including the condition being treated.

13 **SECOND CAUSE FOR DISCIPLINE**

14 **(Unprofessional Conduct)**

15 29. The allegations of Paragraphs 10 through 21 are incorporated by reference as if set
16 out in full.

17 30. Respondent is subject to disciplinary action under section 2234 (unprofessional
18 conduct) because:

- 19 a. Respondent was the physician who prescribed her husband, Patient A, Valium; and
20 b. Respondent improperly diverted a family member's prescription controlled
21 substances for her own use on three separate occasions.

22 **THIRD CAUSE FOR DISCIPLINE**

23 **(Unprofessional Conduct/Failure to Maintain Adequate and Accurate Records)**

24 **Patient B**

25 31. The allegation of Paragraphs 10 and 22 through 24 are incorporated by reference as if
26 set out in full.

27 32. Respondent is subject to disciplinary action under sections 2234 (unprofessional
28 conduct) and/or 2266 (failure to maintain adequate and accurate records):

- 1 a. Respondent documented performing a complete cranial nerve exam on Patient B; and
2 b. Respondent did not perform a complete cranial nerve exam.

3 **FOURTH CAUSE FOR DISCIPLINE**

4 **(Unprofessional conduct)**

5 **Patient C**

6 33. The allegation of Paragraphs 10 and 25 through 26 are incorporated by reference as if
7 set out in full.

8 34. Respondent is subject to disciplinary action under sections 2234 (unprofessional
9 conduct) because:

10 A. Respondent's referral of Patient C to the emergency room was inappropriate and
11 unnecessary by potentially exposing vulnerable patients at the hospital to possible
12 communicable diseases.

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PRAYER

WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged, and that following the hearing, the Medical Board of California issue a decision:

1. Revoking or suspending Physician's and Surgeon's Certificate Number A 82312, issued to Natalia Alexis Abrikosova, M.D.;
2. Revoking, suspending or denying approval of Natalia Alexis Abrikosova, M.D.'s authority to supervise physician assistants and advanced practice nurses;
3. Ordering Natalia Alexis Abrikosova, M.D., to pay the Board the costs of the investigation and enforcement of this case, if placed on probation to pay the costs of probation monitoring; and
4. Taking such other and further action as deemed necessary and proper.

DATED: JAN 30 2023


REJI VARGHESE
Deputy Director
Medical Board of California
Department of Consumer Affairs
State of California
Complainant

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